

**APPLICATION FOR INTERNSHIP**

NEBRASKA HUMANE SOCIETY

8929 Fort Street

OMAHA, NE 68134

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  |  |  |
|  | *Last* | *First* | *M.I.* |

|  |  |  |  |
| --- | --- | --- | --- |
| Phone Number |  | Email |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Current Address |  |  |  |  |
|  | *Street* | *City* | *State* | *Zip* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Permanent Address |  |  |  |  |
|  | *Street* | *City* | *State* | *Zip* |

|  |  |
| --- | --- |
| College/University |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| School Address |  |  |  |  |
|  | *Street* | *City* | *State* | *Zip* |

*Indicate address to send confirmation papers to with* \*

Academic Standing: [ ] Freshman [ ] Sophomore [ ] Junior [ ] Senior [ ] Graduate

**Area of Interest:**

*Please designate a first and second choice (if desired) by placing a 1 and 2 in the corresponding box.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Adoptions** |  | **Animal Behavior** |  | **Animal Medical** |
|  |  |  |  |  |  |
|  | **Animal Welfare** |  | **Grooming** |  | **Neonatal Kitten** |

|  |
| --- |
| Please explain why you are interested in an internship at the Nebraska Humane Society and describe any relevant experience or course work that would be valuable to the internship to which you are applying. |

Are you at least 19 years or older? [ ] YES [ ] NO

Interns will be constantly working around animals and will be exposed to animal feces, dust, and other allergens. Interns may also be asked to lift animals or items that are up to 50 pounds. Will you be able to participate in the program under these conditions with or without an accommodation?

 [ ] YES [ ] NO

|  |  |
| --- | --- |
| Please list preferred internship dates |  |

Please describe predicted availability during internship:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| MON | TUES | WEDS | THURS | FRI | SAT | SUN |
|  |  |  |  |  |  |  |

Please list an emergency contact for our records:

|  |  |
| --- | --- |
| Name |  |
|  |  |
| Phone Number |  | Relationship |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Applicant Signature |  | Date |  |

Please return application with cover letter, references, and your school’s requirements for

independent study via e-mail to internships@nehumanesociety.org with your first area of interest in the subject line (e.g., NHS Animal Welfare Internship Application).